PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	form should be used to correspondence including d below or directed off ious.	or trang the	esmitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBLICAT rders and notification of a a) specifying a new corre	ON FEE (if requirements fees value and fees value)	ired). vill be ; and/o	Blocks 1 through 5 s mailed to the current r (b) indicating a sepa	hould be completed whe correspondence address : arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission.			
David B. Cochi Jones, Day, Reav North Point 901 Lakeside Ay	ran, Esq. vis & Pogue	/2007		I he Stat add	Cer reby certify that the es Postal Service versed to the Mai	tificate is Fce(vith sur I Stop	of Mailing or Trans	mission deposited with the Unite st class mail in an envelope above, or being facetimi
Cleveland, OH 44114					Debra Pejeau .			(Depositor's name
					aller	1	Bestain	(Signature
					Sept.	11	2007	(Date
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVE		OR ATTO		RNEY DOCKET NO.	CONFIRMATION NO.
10/051,697	01/18/2002		William D. Castell		L	555255012306	1441	
		AND N	fOBILE DEVICE	FOR REMOTE CONTRO	L OF A VOICE M	AIL S	YSTEM	
APPLN, TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1400	\$300	\$0		\$1700	09/13/2007
EXAMINER			ART UNIT	CLASS-SUBCLASS	1			
GAUTHIER, GERALD 2614				455-413000	,			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.353). Change of correspondence address for Change of Correspondence Address from PIOSB 1/22 attached. "Fee Address" indication (or "Fee Address" Indication form PIOSB 1/2, Rev 103-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. 2) the name of a single firm (lawing as a member a registered attorney or agent) and the names of up to listed, no name will be printed. egainst. fir on same is 3. Robert C. Liang				
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	TOE	E PRINTED ON	THE PATENT (print or ty	oc)			
PLEASE NOTE: Unla recordation as set forth (A) NAME OF ASSIC	ess an assignee is ident in 37 CFR 3.11. Comp	ified b	elow, no assignce of this form is NO	data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY	atent. If an assign	ee is id	lentified below, the de	ocument has been filed fo
Rese	arch In Moti	on L	imited	Water1	oo, Canada		*	
Please check the appropri						_		up entity Governmen
4a. The following fee(s) a	re submitted:		41	D. Payment of Fee(s): (Pless A check is enclosed. Payment by credit car	se first reapply as	y prev	riously paid issue fee	
5. Change in Entity Stat	us (from status indicate	i above	2)	everpayment, to Depo	Pls.	ref	. 5552550123	06. Thanks
	SMALL ENTITY state			b. Applicant is no lon	ger claiming SMAI	L EN	TITY status. See 37 CF	FR 1.27(e)(2)
NOTE: The Issue Fee and interest as shown by the r	Publication Fee (if req coords of the United Sta	uired) tes Pat	will not be accepted	d from anyone other than t Office.	he applicant; a regi	stered :	attorney or agent; or th	e assignee or other party is
Authorized Signature	David	B.	Calua	<u> </u>	Date7	/,, /	07	
Typed or printed name	David B	. Co	chran		Registration N	lo	39,142	
This collection of informs an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi	ation is required by 37 Chality is governed by 35 application form to the ons for reducing this burginia 22313-1450. DO	FR 1.3 U.S.C USPT den, sl	11. The informatic 122 and 37 CFR O. Time will vary bould be sent to the SEND FEES OF	on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO	etain a benefit by t imated to take 12 r idual case. Any co r, U.S. Patent and	he pubi ninutes mment Traden	lic which is to file (and to complete, includin s on the amount of tin ark Office, U.S. Deps	by the USPTO to process g gathering, preparing, and ne you require to complete artment of Commerce, P.O.

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.